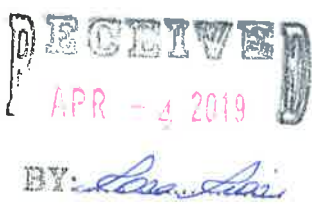


CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 27
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mr. Jesse L <small>NICKNAME LAST SUFFIX</small> Davis		OFFICE USE ONLY Date Received  Date Hand-delivered or Date Postmarked
	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 2671 Denton TX 76202		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	AREA CODE PHONE NUMBER EXTENSION (817) 253-1132		
	MS / MRS / MR FIRST MI Mrs. Ann <small>NICKNAME LAST SUFFIX</small> Smith		
5 CANDIDATE / OFFICEHOLDER PHONE	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2013 Cindy Lane Denton, TX 76207		Receipt # Amount \$
	AREA CODE PHONE NUMBER EXTENSION (940) 453-7424		Date Processed Date Imaged
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mrs. Ann <small>NICKNAME LAST SUFFIX</small> Smith		Date Hand-delivered or Date Postmarked
	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2013 Cindy Lane Denton, TX 76207		Receipt # Amount \$
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	AREA CODE PHONE NUMBER EXTENSION (940) 453-7424		Date Processed Date Imaged
	MS / MRS / MR FIRST MI Mrs. Ann <small>NICKNAME LAST SUFFIX</small> Smith		Receipt # Amount \$
8 CAMPAIGN TREASURER PHONE	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2013 Cindy Lane Denton, TX 76207		Date Hand-delivered or Date Postmarked
	AREA CODE PHONE NUMBER EXTENSION (940) 453-7424		Receipt # Amount \$
9 REPORT TYPE	ELECTION DATE Month Day Year 5 / 4 / 19		Date Hand-delivered or Date Postmarked
	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special		Receipt # Amount \$
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 2 / 12 / 19 3 / 25 / 19		Receipt # Amount \$
	ELECTION DATE Month Day Year 5 / 4 / 19		Date Hand-delivered or Date Postmarked
11 ELECTION	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special		Receipt # Amount \$
	OFFICE HELD (if any) None		Date Hand-delivered or Date Postmarked
12 OFFICE	OFFICE HELD (if any) None		Date Hand-delivered or Date Postmarked
	OFFICE SOUGHT (if known) Denton City Council, District 3		Receipt # Amount \$

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM
POLITICAL
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

17 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ all itemized

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 9735.00

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS,
UNLESS ITEMIZED

\$ all itemized

4. TOTAL POLITICAL EXPENDITURES

\$ 23,483.02

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY
OF REPORTING PERIOD

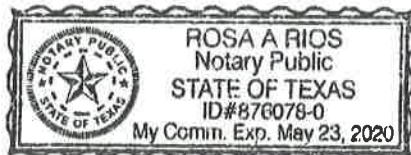
\$ 0

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$ 0

18 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jesse Davis, this the 4th
day of April, 20 19, to certify which, witness my hand and seal of office.

Rosa A. Rios
Signature of officer administering oath

Rosa A. Rios
Printed name of officer administering oath

Notary Public
Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

19 FILER NAME		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 9,535.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 200.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 19.75
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 23,445.23
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 18.04
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **11**

2 FILER NAME

Jesse Davis

3 Filer ID (Ethics Commission Filers)

4 Date

2/14/14

5 Full name of contributor

☐ out-of-state PAC (ID#:

Chip Sargent

7 Amount of contribution (\$)

\$100

6 Contributor address;

City; State; Zip Code

6111 Tom Maywell Road Aubrey TX 76227

8 Principal occupation / Job title (See Instructions)

Appraiser

9 Employer (See Instructions)

Self

Date

2/21/14

Full name of contributor

☐ out-of-state PAC (ID#:

Dena Meeks

Amount of contribution (\$)

\$300

Contributor address;

City; State; Zip Code

560 Diamond Point Oak Point, TX 75062

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date

2/25/14

Full name of contributor

☐ out-of-state PAC (ID#:

Tim Powers

Amount of contribution (\$)

\$500

Contributor address;

City; State; Zip Code

215 W. Oak Denton TX 76201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/20/14

Full name of contributor

☐ out-of-state PAC (ID#:

Nick Schroeder

Amount of contribution (\$)

\$100.

Contributor address;

City; State; Zip Code

2230 Kennewick Pl. NE Renton, WA 98056

Principal occupation / Job title (See Instructions)

Brand Associate

Employer (See Instructions)

Anheuser-Busch In Bev

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **13 1360**

2 FILER NAME

Jesse Davis

3 Filer ID (Ethics Commission Filers)

4 Date

3/2/14

5 Full name of contributor

☐ out-of-state PAC (ID#:

Dorwin Sargent

7 Amount of contribution (\$)

\$400

6 Contributor address;

City; State; Zip Code

800 Crest Oak Place Denton TX 76209

8 Principal occupation / Job title (See Instructions)

A Horney

9 Employer (See Instructions)

Huges, Berry, White, and Vanzant (HBWV)

Date

3/4/14

Full name of contributor

☐ out-of-state PAC (ID#:

Forrest Beadle

Amount of contribution (\$)

\$1500

Contributor address;

City; State; Zip Code

6 Royal Oaks Denton TX 76210

Principal occupation / Job title (See Instructions)

Judge

Employer (See Instructions)

Denton County

Date

3/5/14

Full name of contributor

☐ out-of-state PAC (ID#:

Marta Menn

Amount of contribution (\$)

\$25

Contributor address;

City; State; Zip Code

2717 Skivne Dr. Argyle TX 76226

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date

3/5/14

Full name of contributor

☐ out-of-state PAC (ID#:

Kimberly Turner

Amount of contribution (\$)

\$100

Contributor address;

City; State; Zip Code

9336 Loma Vista Dallas, TX 75243

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **1311** *507*

2 FILER NAME **Jesse Davis**

3 Filer ID (Ethics Commission Filers)

4 Date

3/5/14

5 Full name of contributor

George Roland

☐ out-of-state PAC (ID#:

6 Contributor address;

City; State; Zip Code

2704 Clarendon Dr. Denton, TX 76207

7 Amount of contribution (\$)

\$100

8 Principal occupation / Job title (See Instructions)

Attorney

9 Employer (See Instructions)

Self

Date

3/5/14

Full name of contributor

Jennifer Monilton

☐ out-of-state PAC (ID#:

Contributor address;

City; State; Zip Code

2108 Carriage Hill Denton, TX 76207

Amount of contribution (\$)

\$50

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/5/14

Full name of contributor

Pat Smith

☐ out-of-state PAC (ID#:

Contributor address;

City; State; Zip Code

1417 Cambridge Lane Denton TX 76209

Amount of contribution (\$)

\$100

Principal occupation / Job title (See Instructions)

Outreach Director

Employer (See Instructions)

Denton Bible Church

Date

3/5/14

Full name of contributor

Alan McNutt

☐ out-of-state PAC (ID#:

Contributor address;

City; State; Zip Code

4401 N. I-35 Ste 107 Denton TX 76207

Amount of contribution (\$)

\$500

Principal occupation / Job title (See Instructions)

Real Estate Investment

Employer (See Instructions)

Self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **1311** **500**

2 FILER NAME

Jesse Davis

3 Filer ID (Ethics Commission Filers)

4 Date

3/5/14

5 Full name of contributor

Joe Urbach

☐ out-of-state PAC (ID#:

7 Amount of contribution (\$)

\$100

6 Contributor address;

City; State; Zip Code

1846 North Thorne Ave Fresno, CA 93704

8 Principal occupation / Job title (See Instructions)

Lecturer

9 Employer (See Instructions)

Fresno State

Date

3/8/14

Full name of contributor

Rick Subida

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

\$50

Contributor address;

City; State; Zip Code

9633 Callaway Court Denton, TX 76207

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date

3/8/14

Full name of contributor

Michael Dickens

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

\$200

Contributor address;

City; State; Zip Code

700 Seville Rd Denton TX 76205

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Denton County

Date

3/12/14

Full name of contributor

Louis Leurig

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

\$50

Contributor address;

City; State; Zip Code

10900 Murray S. Johnson St. Denton TX 76207

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 13 11 500

2 FILER NAME

Jesse Davis

3 Filer ID (Ethics Commission Filers)

4 Date

3/12/14

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Noel Waynant

7 Amount of contribution (\$)

\$10

6 Contributor address;

City; State; Zip Code

9113 Compton Dr. Denton TX 76207

8 Principal occupation / Job title (See Instructions)

Retired

9 Employer (See Instructions)

Date

3/12/14

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Susan Parker

Amount of contribution (\$)

\$100

Contributor address;

City; State; Zip Code

8816 Creekview Dr Denton TX 76207

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date

3/12/14

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Doris Cline

Amount of contribution (\$)

\$1000

Contributor address;

City; State; Zip Code

158 Cardinal Circle Shady shores, TX 76205

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date

3/12/14

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Tommy Caruthers

Amount of contribution (\$)

\$250

Contributor address;

City; State; Zip Code

204 Ridgecrest Denton TX 76205

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 1311 50

2 FILER NAME

Jesse Davis

3 Filer ID (Ethics Commission Filers)

4 Date

3/12/14

5 Full name of contributor

Pat Caruthers

☐ out-of-state PAC (ID#:

7 Amount of contribution (\$)

\$250

6 Contributor address;

City; State; Zip Code

204 Ridgecrest Denton TX 76201

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3/12/14

Full name of contributor

Troy Griffiths

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

\$500

Contributor address;

City; State; Zip Code

401 E Corporate #150 Lewisville TX 75057

Principal occupation / Job title (See Instructions)

Financial Analyst

Employer (See Instructions)

Caliber Collision

Date

3/14/14

Full name of contributor

John Lindsay

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

\$250

Contributor address;

City; State; Zip Code

32 Langhorne Circle Newport News, VA 23606

Principal occupation / Job title (See Instructions)

Emergency Planner

Employer (See Instructions)

Date

3/16/14

Full name of contributor

Bonnie Ivins

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

\$100

Contributor address;

City; State; Zip Code

1108 Southmont Dr. Denton TX 76205

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 1311 500

2 FILER NAME

Jesse Davis

3 Filer ID (Ethics Commission Filers)

4 Date

3/18/14

5 Full name of contributor

Thomas Ehinger

☐ out-of-state PAC (ID#:

7 Amount of contribution (\$)

\$50

6 Contributor address;

City; State; Zip Code

9512 Crestview Dr, Denton TX 76207

8 Principal occupation / Job title (See Instructions)

Retired

9 Employer (See Instructions)

Date

3/18/14

Full name of contributor

Barbara Russell

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

\$100

Contributor address;

City; State; Zip Code

1324 Heather Lane Denton, TX 76209

Principal occupation / Job title (See Instructions)

Realtor

Employer (See Instructions)

Self

Date

3/18/14

Full name of contributor

Peggy Crandall

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

\$50

Contributor address;

City; State; Zip Code

10012 Countryside Dr. Denton TX 76207

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date

3/18/14

Full name of contributor

Don White

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

\$300

Contributor address;

City; State; Zip Code

2105 Savannah Trail Denton TX 76205

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 13/11

2 FILER NAME

Jesse Davis

3 Filer ID (Ethics Commission Filers)

4 Date

3/21/2014

5 Full name of contributor

Marsh O'Loughlin

☐ out-of-state PAC (ID#:

7 Amount of contribution (\$)

\$150

6 Contributor address;

City; State; Zip Code

10000 Hansford Dr. Denton TX 76207

8 Principal occupation / Job title (See Instructions)

Retired

9 Employer (See Instructions)

Date

3/21/14

Full name of contributor

Ronald Zimm

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

\$100

Contributor address;

City; State; Zip Code

9613 Rosewood Dr Denton TX 76207

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date

3/22/14

Full name of contributor

Don White, Jr.

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

\$300

Contributor address;

City; State; Zip Code

2020 Pembroke Pl Denton, TX 76201

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

HBWV

Date

3/22/14

Full name of contributor

Richard Hayes

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

\$500

Contributor address;

City; State; Zip Code

814 W. Oak St. Denton TX 76201

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

HBWV

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 2311

2 FILER NAME

Jesse Davis

3 Filer ID (Ethics Commission Filers)

4 Date

3/22/14

5 Full name of contributor

Byron Berry

☐ out-of-state PAC (ID#)

7 Amount of contribution (\$)

\$300

6 Contributor address;

City; State; Zip Code

PO Box 5 Rosston, TX 76263

8 Principal occupation / Job title (See Instructions)

Attorney

9 Employer (See Instructions)

HBWV

Date

3/23/14

Full name of contributor

Ronald Leher

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

\$50

Contributor address;

City; State; Zip Code

9825 Callaway Denton, TX 76207

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date

3/24/14

Full name of contributor

Richard Wells

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

\$100

Contributor address;

City; State; Zip Code

3830 Warschun Rd. Aubrey TX 76227

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date

3/24/14

Full name of contributor

Claudia Brown

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

\$50

Contributor address;

City; State; Zip Code

315 Ridgcrest Denton TX 76205

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **11** **520**

2 FILER NAME

Jesse Davis

3 Filer ID (Ethics Commission Filers)

4 Date

3/25/14

5 Full name of contributor

Diane Edmonson

☐ out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$100

6 Contributor address;

City; State; Zip Code

8913 Crestview Denton, TX 76207

8 Principal occupation / Job title (See Instructions)

County Commissioner

9 Employer (See Instructions)

Denton County

Date

3/25/14

Full name of contributor

Kevin Roden

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$200

Contributor address;

City; State; Zip Code

322 Texas Denton TX 76201

Principal occupation / Job title (See Instructions)

Vice President

Employer (See Instructions)

Randy Rosic

Date

3/25/14

Full name of contributor

Arthur Sayre

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$250

Contributor address;

City; State; Zip Code

1603 Fairway Dr. Corinth, TX 76210

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date

3/25/14

Full name of contributor

Carl Anderson

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$200

Contributor address;

City; State; Zip Code

114 Mustang Trail Shady Shores, TX 76208

Principal occupation / Job title (See Instructions)

Sales Manager

Employer (See Instructions)

Bill Viter Ford

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 11

2 FILER NAME Jesse Davis

3 Filer ID (Ethics Commission Filers)

4 Date

3/25/19

5 Full name of contributor

Glenn Carlton

☐ out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$100

6 Contributor address;

City;

State;

Zip Code

13217 Carly Mill Rd. Sanger TX 76266

8 Principal occupation / Job title (See Instructions)

Rancher

9 Employer (See Instructions)

Carlton Cattle Co.

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: 1

2 FILER NAME Jesse Davis

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$

5 Date
3/22/14

6 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Frank Dudowicz

7 Contributor address; City; State; Zip Code
3605 Falcon Ct. Denton TX 76210

8 Amount of Contribution \$
\$200

9 In-kind contribution description

wire sign stakes

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)
Retired

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Contributor address; City; State; Zip Code

Amount of Contribution \$

In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Jesse Davis</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>2/27/14</i>	5 Payee name <i>Point Bank</i>		
6 Amount (\$) <i>14.75</i>	7 Payee address; City; State; Zip Code <i>1706 N. Carroll Blvd. Denton TX 76201</i>		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Accounting / Banking</i>		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	<div style="display: flex; justify-content: space-between;"> <div>9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</div> <div>Candidate / Officeholder name</div> <div>Office sought</div> <div>Office held</div> </div>		
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	<div style="display: flex; justify-content: space-between;"> <div>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</div> <div>Candidate / Officeholder name</div> <div>Office sought</div> <div>Office held</div> </div>		
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	<div style="display: flex; justify-content: space-between;"> <div>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</div> <div>Candidate / Officeholder name</div> <div>Office sought</div> <div>Office held</div> </div>		
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	<div style="display: flex; justify-content: space-between;"> <div>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</div> <div>Candidate / Officeholder name</div> <div>Office sought</div> <div>Office held</div> </div>		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: <i>for 9 sur</i>		2 FILER NAME <i>Jesse Davis</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$ <i>Q</i>	
5 Date <i>2/12/19</i>		6 Payee name <i>Ranjani Groth Photography</i>			
7 Amount (\$) <i>184.44</i>		8 Payee address; City; State; Zip Code <i>1408 Tensley Denton, TX 76205</i>			
9 TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
10 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <i>Contract Labor</i>		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date <i>2/12/19</i>		Payee name <i>Go Daddy. com</i>			
Amount (\$) <i>21.34</i>		Payee address; City; State; Zip Code <i>14455 N. Hayden Rd. #226 Scottsdale, AZ 85260</i>			
TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name		Office sought		Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 10 9 50 2 FILER NAME Jesse Davis 3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 4

5 Date 2/19/14 6 Payee name G II AL Group

7 Amount (\$) 4330.00 8 Payee address; City; State; Zip Code
600 8th Street #100 Wichita Falls, TX 76301

9 TYPE OF EXPENDITURE ☒ Political ☐ Non-Political

10 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense

11 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date 2/19/14 Payee name Grass Routes PR

Amount (\$) 2340.00 Payee address; City; State; Zip Code
2541 S IH 35 #200-184 Round Rock, TX 78664

TYPE OF EXPENDITURE ☒ Political ☐ Non-Political

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Other - Database and App Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 109 360	2 FILER NAME Jesse Davis	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 2
5 Date 2/22/14	6 Payee name Go Daddy . com	
7 Amount (\$) 21.34	8 Payee address; City; State; Zip Code 14455 N. Hayden Rd. #226 Scottsdale, AZ 85260	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

Date 2/23/14	Payee name Fed Ex	
Amount (\$) 55.11	Payee address; City; State; Zip Code 2430 S I 35 #176 Denton, TX 76205	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: **109 360** 2 FILER NAME **Terse Davis** 3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ **2**

5 Date **2/26/19** 6 Payee name **Ranjani Groth Photography**

7 Amount (\$) **378.88** 8 Payee address; City: State: Zip Code
1408 Tensley Denton, TX 76205

9 TYPE OF EXPENDITURE ☒ Political ☐ Non-Political

10 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) **Contract Labor** (b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense

11 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date **2/26/19** Payee name **Ranjani Groth Photography**

Amount (\$) **649.50** Payee address; City: State: Zip Code
1408 Tensley Denton, TX 76205

TYPE OF EXPENDITURE ☒ Political ☐ Non-Political

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) **Contract Labor** Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Bookkeeping
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4; **10 9 JLO** 2 FILER NAME **Jesse Davis** 3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ **2**

5 Date **3/6/14** 6 Payee name **Robson Publishing**

7 Amount (\$) **638.35** 8 Payee address; City; State; Zip Code **9532 East Riggs Rd Sun Lakes, AZ 85248**

9 TYPE OF EXPENDITURE ☒ Political ☐ Non-Political

10 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) **Advertising Expense** (b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX. officeholder living expense

11 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date **3/9/14** Payee name **First Graphics Services**

Amount (\$) **1753.11** Payee address; City; State; Zip Code **224 Garvon St. Garland, TX 75040**

TYPE OF EXPENDITURE ☒ Political ☐ Non-Political

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) **Advertising Expense** Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX. officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 10 of 10 2 FILER NAME Jesse Davis 3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 12

5 Date 3/14/14 6 Payee name Impress Graphics

7 Amount (\$) 110.24 8 Payee address; City: State: Zip Code
733 Ft. Worth Dr. Ste 100, Denton TX 76201

9 TYPE OF EXPENDITURE ☒ Political ☐ Non-Political

10 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense

11 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date 3/15/14 Payee name Office Depot

Amount (\$) 33.30 Payee address; City: State: Zip Code
2300 San Jacinto Blvd Denton, TX 76205

TYPE OF EXPENDITURE ☒ Political ☐ Non-Political

PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Expense (b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: to a 50		2 FILER NAME Jesse Davis		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$ 2	
5 Date 3/16/14		6 Payee name Denton Donuts			
7 Amount (\$) 21.50		8 Payee address; City: State: Zip Code 505 W. University Dr Denton, TX 76201			
9 TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
10 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH					
Date 3/23/14		Payee name First Graphics Signs Services			
Amount (\$) 1,753.11		Payee address; City: State: Zip Code 224 Garon St. Garland, TX 75040			
TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH					
Candidate / Officeholder name		Office sought		Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: **109 JLD** 2 FILER NAME **Jesse Davis** 3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ **Q**

5 Date **3/23/14** 6 Payee name **G H Ad Group**

7 Amount (\$) **10,630.12** 8 Payee address; City: State: Zip Code **600 8th Street #100 Wichita Falls, TX 76301**

9 TYPE OF EXPENDITURE ☒ Political ☐ Non-Political

10 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) **Advertising / Printing Expense** (b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

11 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date **3/21/14** Payee name **Impress Graphics**

Amount (\$) **496.78** Payee address; City: State: Zip Code **733 Ft. Worth Dr. Ste 100 Denton, TX 76201**

TYPE OF EXPENDITURE ☒ Political ☐ Non-Political

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) **Printing Expense** Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: **9** 2 FILER NAME **Jesse Davis** 3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ **2**

5 Date **3/24/14** 6 Payee name **Loves**

7 Amount (\$) **23.06** 8 Payee address; City; State; Zip Code **1255 S Loop 288 Denton, TX 76205**

9 TYPE OF EXPENDITURE ☒ Political ☐ Non-Political

10 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) **Office Expense** (b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

11 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date Payee name
Amount (\$) Payee address; City; State; Zip Code
TYPE OF EXPENDITURE ☐ Political ☐ Non-Political
PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 2		2 FILER NAME Jesse Davis		3 Filer ID (Ethics Commission Filers)	
4 Date 3/4/19		5 Payee name UNT Parking			
6 Amount (\$) 2.00 <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 620 Central Ave. Denton, TX 76201			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Travel in District		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/9/2019		Payee name USPS			
Amount (\$) 11.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 101 E. McKinney Denton, TX 76201			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/24/19		Payee name Winco			
Amount (\$) 3.05 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 2645 W. University Dr. Denton, TX 76201			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Collection/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: <div style="text-align: center; font-size: 1.5em;">2</div>	2 FILER NAME <div style="text-align: center; font-size: 1.2em;">Jesse Davis</div>	3 Filer ID (Ethics Commission Filers)
4 Date <div style="text-align: center; font-size: 1.2em;">3/24/14</div>	5 Payee name <div style="text-align: center; font-size: 1.2em;">Albertsons</div>	
6 Amount (\$) <div style="text-align: center; font-size: 1.2em;">1.94</div> <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <div style="text-align: center; font-size: 1.2em;">2321 W. University Dr. Denton, TX 76201</div>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <div style="text-align: center; font-size: 1.2em;">Office Expense</div>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name	Office sought
Date	Payee name	Office held
Amount (\$)	Payee address; City; State; Zip Code	Office held
<input type="checkbox"/> Reimbursement from political contributions intended	Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
PURPOSE OF EXPENDITURE		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name	Office sought
Date	Payee name	Office held
Amount (\$)	Payee address; City; State; Zip Code	Office held
<input type="checkbox"/> Reimbursement from political contributions intended	Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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PURPOSE OF EXPENDITURE		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED